STATE OF ARKANSAS
WASTE TIRE FEE

CERT.#

Report For:

WASTE TIRE FEE DISTRICT: COUNTY	Due on or Before:			
Name:	A	В	C	
Items	1a + 1b	1b (only)	Imported	
Number of Taxable New Tires Sold No. of Automobile Tires a No. of Big Truck Tires b				
2. Rates:	\$1.90	\$2.85		
Amount Due (Multiply line 1 by line 2 for each column)				
4. Penalty (No. Months late X .05= X line 3 of each column)				
5. Interest No. Months late X .0083 = X line 3 of each column)				
6. SUB-TOTAL AMOUNTS DUE (Sum of 3+4+5 for each column)				
7. TOTAL AMOUNT DUE: (Sum of line 6. Column Sub-Totals Due)	Remit with payment to: Miscellaneous Tax Section			
Check No Check Date:	-	7th & Wolfe		
(Signature) (Date)	Little Rock AR 72203			
		Phone (501) 682-7187	
×				
STATE OF ARKANSAS CERT.#	Report For:			
WASTE TIRE FEE DISTRICT:	Due on or Befo	ore:		
COUNTY: (Send this copy to your Waste Disposal District)	Due on of Before.			
Name:	A	В	C	
Items	1a + 1b	1b (only)	Imported	
Number of Taxable New Tires Sold	14 - 15	ib (only)	importeu	
No. of Automobile Tires a No. of Big Truck Tires b				
2. Rates:	\$1.90	\$2.85		
Amount Due (Multiply line 1 by line 2 for each Column)				
4. Penalty (No. Months late X .05= X line 3 of each column)				
5. Interest				
No. Months late X. 0083 = X line 3 of each column 6. SUB-TOTAL AMOUNTS DUE (Sum of 3+4+5 for each column)				
7. TOTAL AMOUNT DUE: (Sum of line 6. Column Sub-Totals Due) I declare under penalty of filing a false return that the above information is true and correct	\$			
(Signature) (Date)	:			
×				
STATE OF ARKANSAS CERT.#	Report For:			
WASTE TIRE FEE DISTRICT:	Due on or Before:			
COUNTY:		_		
Name:	A	B	C	
Items 1. Number of Taxable New Tires Sold	1a + 1b	1b (only)	Imported	
No. of Automobile Tires a No. of Big Truck Tires b				
2. Rates:	\$1.90	\$2.85		
Amount Due (Multiply line 1 by line 2 for each column) Penalty				
(No. Months late X .05= X line 3 of each column)				
5. Interest				
No. Months late X .0083 = X line 3 of each column) 6. SUB-TOTAL AMOUNTS DUE (Sum of 3+4+5 for each column)				
· ,				
7. TOTAL AMOUNT DUE: (Sum of line 6. Column Sub-Totals				
Due)\$				
I declare under penalty of filing a false return that the above information is true and correct.				
Check No	DEALERS COPY	OD VOUD DECORDS		
Check Date: (Signature) (Date)	KEEP IHIS COPY F	OR YOUR RECORDS		